



Environmental Health – Land Use Services

Building and Safety

(909) 387-8311

(760) 995-8140

www.sbcounty.gov/ehlus

PERMIT # _____

PARCEL # _____

CONSTRUCTION PLAN SUBMITTAL CHECKLIST

A PRE-CONSTRUCTION OR EROSION CONTROL INSPECTION IS REQUIRED PRIOR TO PLAN REVIEW APPROVAL

Technician: Complete the following prior to acceptance for plan review.

| PROVIDED | NEEDED | <u>GENERAL REQUIREMENTS</u> |
|----------|--------|--|
| _____ | _____ | 1. Plans are clear, legible and of sufficient size (18" x 24" suggested minimum). |
| _____ | _____ | 2. Plans signed by person that prepared them |
| _____ | _____ | 3. Plans and engineering calculations prepared by an Architect, Civil or Structural Engineer: _____ Required _____ Not Required |
| _____ | _____ | 4. Water availability shown: _____ Public _____ Private Well _____ Other _____ |
| _____ | _____ | 5. Sewage disposal systems: _____ Public Sewer _____ Private _____ Sewer Letter _____ Other _____ |
| _____ | _____ | 6. Grading Plan: _____ Required _____ Not Required _____ Unable to determine with information available. |
| _____ | _____ | 7. Erosion Control Plan: _____ Required _____ Not Required |
| _____ | _____ | 8. Pre-Construction Inspection: _____ Required _____ Not Required |
| _____ | _____ | 9. Land Use Plot Plan: _____ Required _____ Not Required |
| _____ | _____ | 10. Areas with expansive or collapsible soils shall include a soils report with the submittal: _____ Required _____ Not Required |
| _____ | _____ | 11. Hold plan review for conditions of approval: _____ type |
| _____ | _____ | 12. Fire Department Project Conditions or C.U.P. (See Standard Procedure A-113). |
| _____ | _____ | 13. Substantial improvement calculation |
| | | <u>SPECIFIC PLAN REQUIREMENTS</u> |
| _____ | _____ | 1. Plot Plan |
| _____ | _____ | 2. Floor Plan |
| _____ | _____ | 3. Foundation Plan |
| _____ | _____ | 4. Truss Drawings (when used) |
| _____ | _____ | 5. Energy analysis |
| _____ | _____ | A. Compliance method and load calculations |
| _____ | _____ | B. CF-1R form signed |
| _____ | _____ | 6. Elevations |
| _____ | _____ | 7. Framing Sections |
| _____ | _____ | 8. Other _____ |

By: _____

Date: _____

PLEASE RETURN THIS SHEET WITH REQUESTED INFORMATION